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PTO/SB/21 (07-08)

SEP 0 7 2006

	A	upplication Number		10/622,3	13			
TRANSMITTAL FORM		iling Date		July 17, 2003		· · · · · · · · · · · · · · · · · · ·		
		irst Named Inventor		BARDEN, Julian Alexander				
	A	krt Unit		1647		- 		
(to be used for all correspondence after initial filing)		xaminer Name		Jon McClelland Lockard				
Total Number of Pages in This Submission 20		Attorney Docket Number 080404-000000US						
Total number of Pages III Title Spunipacini 20								
ENCLOSURES (Check all that apply)								
Fee Transmittel Form (1 p., submitted in duplicate).	Dn	mwing(s)			After Allow	rance Communication to TC		
Fee Attached	Lio	cansing-related Paper	9		of Appeals	mmunication to Board and Interferences		
Response to Restriction Requirement and Amendment	Pé	elition			(Appeal No	mmunication to TC lice, Brief, Reply Brief)		
(15 pp.). After Final		stition to Convert to a ovisional Application			Proprietar	/ Information		
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address		is 🔲	Status Let	ter		
Extension of Time Request		rminal Disclaimer	11007,20100		Other Enc below):	osure(s) (please identify		
(1 p., submitted in duplicate). Express Abandonment Request	Re	equest for Refund						
Information Disclosure Statement	CD	CD, Number of CD(s)						
		Landscape Table	on CD					
Certified Copy of Priority Document(s)								
Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	•							
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Elem Nama		APPLICANT, A	TORNE	I, UK A	JEN I			
Townsend and Towns	end and C	Crew LLP						
Signature West Character								
Printed name Neil G. Miyamoto								
Date September 7, 2006	September 7, 2006			50,3	50,370			
								
CERTIFICATE OF TRANSMISSION								
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. 1-571-273-8300, on September 7, 2006.								
Signature		mon		•				
Typed or printed name Yvonne Mock					Date	September 7, 2006		

SEP 0 7 2006

PTO/SB/17 (01-06)

See a surround to the Organization Appropriations Ast 2005 (ALS ARRE)	Complete if Known						
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number	ation Number 10/622,313					
FEE TRANSMITTAL	Filing Date	July 17, 2003					
For FY 2006	First Named Inventor	BARDEN, Julian Alexander					
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name	Jon McCielland Loc	kard				
Applicant claims small entry status. 356 57 GFK 1.27	Art Unit	1647					
TOTAL AMOUNT OF PAYMENT (\$) 125	Attorney Docket No.						
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Moncy Order Other (please identify):							
Deposit Account Doposit Account Number							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee							
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION (All the fees below are due upon f	ilng or may be subjec	t to a surcharge.)					
Small Entity	Small Entity	(AMINATION FEES Small Entity eo (\$) Fee (\$)	Fees Paid (\$)				
		200 100	1,217.7.11.11.1				
4		130 65					
		160 80					
		600 300					
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2. EXCESS CLAIM FEES Fee Description		Fee (\$)	Fee.(5)				
Each claim over 20 (including Reissues) Bach independent claim over 3 (including Reissues)		50 200	25 100				
Multiple dependent claims		360	180				
Total Claims Extra Claims Fee (\$) F	ee Paid (\$)						
72 -20 or HP = 1 × \$25 = HP = highest number of total dains paid for, if greater than 20	<u>\$25</u>	<u>Fee (\$)</u>	Fee Paid (\$)				
Indep. Claims Extra Claims Fee (\$) F							
10 -9 or HP = 1 × \$100 =	\$100		•				
HP = highest number of independent cialms paid for, if greater than 3							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CPR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CPR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = / 50 = (round up to a whole number) x =							
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small ontity discount)							
Other (e.g., late filing surcharge):							
SUBMITTED BY							
Signature 2111	Registration No. (Attorney/Agent) 50,3	70 Telephons	650-326-2400				
Name (Print/Tyne) Noil G Miyamoth		Date Sec	tember 7, 2006				

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